

MINUTES OF FEBRUARY 5, 2002
PARAMEDIC TASK FORCE MEETING
Holiday Inn
Burbank

<u>MEMBERS PRESENT</u>	<u>EMSA STAFF PRESENT</u>	<u>ALTERNATES PRESENT</u>	<u>MEMBERS ABSENT</u>	<u>ALTERNATES ABSENT</u>
Dean Anderson Debbie Becker Carol Gunter Jim Holbrook Tom McGinnis Kym Mitchell Jan Ogar Jim Pointer Kevin White	Nancy Steiner Connie Telford Richard Watson	Mike Metro Ray Navarro Frank Pratt	Bill Bower Bill Cody Sabina Imrie Bill Koenig Kevin Rittger Cheryl Smith Visitor: Darryl Cleveland, Corona Fire Dept.	Linda Anderson Nancy Eubanks Nancy Justin Dick Mayberry Linda Mulgrew David Nevins

I Review and Approval of January 8, 2002 Meeting Minutes

The January 8, 2002 minutes were approved with no changes.

II Setting of the Agenda

There were some questions regarding the data elements of the statewide data set being developed by the Data Vision Committee, whether the data set would be reviewed by the PTF and which group would be submitting the changes to the regulations since data is an integral part of the EIP Program the Paramedic Task Force is working on. Nancy Steiner explained that it hasn't been determined yet which group will be proposing the changes to the regulations, but the Data Vision Group and the Paramedic Task Force will be working closely together on the project. Concern was also expressed regarding the data requested being realistic and the ability of constituent groups to gather the data. It was also suggested that the final data set should be pilot tested in a region before it is put in regulations to ensure that the data collected will be useful. Nancy will clarify how the process will work with Bonnie Sinz and agendize these issues and other concerns expressed by the PTF members for the next meeting.

Nancy Steiner informed the PTF members that reimbursement for attending the PTF meetings may be available for the members through the Vision Office, and to let her know if reimbursement is needed.

III Paramedic Training Discussion

Several documents were distributed to the PTF members which included: CoAEMSP Standards and Guidelines, a copy of the portion of the regulations that address field internships, CPPD evaluation forms for field internships, issue paper from CPPD on field internships, excerpts of notes from EMDAC meeting regarding field internships, and the 8-hour training program developed by CPPD for preceptors.

-Field Internship

Nancy S. explained that the goal of the PTF regarding field internships is to make revisions to the paramedic regulations that will help to ensure good quality field internships with well qualified preceptors, and to find ways to provide more incentives for agencies to provide field internship opportunities.

Discussion regarding training issues and field internship issues included the following:

- ??Allowing field internships to be completed in other states (some other states allow this).
- ??Internships must provide a full continuum of care.
- ??There is a problem with the EMSA policy that says 50% of internship must be on a transport vehicle. Is that 50% of hours or 50% of contacts?
- ??Recommendation that the regulations require anatomy, physiology, English and math as prerequisites to entering a paramedic training program.
- ??Some training issues should be eliminated with CoAEMSP accreditation because of specific clinical and field requirements.
- ??There is a lack of ability of preceptors to instruct students.
- ??Should the regulations address selection, training and qualifications of a preceptor in addition to the requirements of CoAEMSP since new programs must be in operation for a year before applying for accreditation?
- ??Numerous requirements on preceptors may increase the problem of having enough preceptors.
- ??We should try to find incentives for paramedics to become preceptors, such as eliminating the 8-hour limit for CE for precepting or at least increase the hour limit.
- ??There is more value for precepting than 8 hours.
- ??Doctors can meet all of their CE requirements from instruction.
- ??Preceptors need to meet minimum requirements and complete preceptor training classes.
- ??CPPD has created a preceptor training program that is used by several of the training programs.
- ??Regulations need to be clear that the training program is accountable for the training and selection of preceptors and for assigning students to the preceptors, and have language such as, "The assignment of a student to a preceptor shall be a collaborative effort between the training program and the provider agency".
- ??You can't have requirements for the training agency and requirements for the preceptor without some sort of regulatory requirement/responsibility for the provider agencies, including hospitals, doing the precepting.
- ??There are some students that have to find their own preceptors.
- ??Training programs should be required to have provisions for internships before they enroll the students.
- ??What is the commonality among students, preceptors, training programs, service providers and local and state government to produce qualified paramedics?
- ??Should there be a separate chapter in the regulations for training?

??Put in RFP for Exclusive Operating Areas that EMS provider must participate actively in precepting paramedic students.

??Need to tie paramedic training to the CQI process.

??Core issues of conversation –

- Relational/collaborative agreements between training institutions and the preceptor agencies.
- Regulations placed on provider agencies requiring them to intern.
- Regulation change to require the approved preceptor training program to include instruction and educational and mentoring process.
- Increase amount of CE granted for precepting.
- Hospitals that participate in the EMS system should also have regulatory requirements for providing training.

?? Section 100149, Teaching Staff, (9), needs qualification as to what an acceptable preceptor training program is. (*Mike Metro will propose language for this section.*)

?? Do we need to look at items such as frequency of calls, volume of calls, and ability to teach?

?? Independence yet interdependence between training program and provider agency is key to successful field internships.

?? Language was suggested that Paramedic regulations read something to the effect of “Paramedic training facility/school shall guarantee clinical/field internship training will commence no later than one month after completion of didactic section of training, or ...no more than one month between each phase of training”.

Nancy Steiner requested that if anyone has any recommendation for revisions to the regulation sections pertaining to training and field internships, and how to incorporate the items discussed, they can send her their comments or recommended language by email and she can draft something for the April meeting.

There was also some discussion on getting information on the advances in EMS and EMS education out to the public via County PIO's, City Councils, County Boards of Supervisors, etc. This will be agendized for the April meeting.

IV Schedule Next Meeting

The next meeting will be March 5, 2002 in Sacramento.

V Adjournment

The meeting adjourned at 4:00 p.m.

